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# NOTICE OF ALLOWANCE AND FEE(S) DUE

24252

7590

04/22/2005

OSRAM SYLVANIA INC 100 ENDICOTT STREET DANVERS, MA 01923 EXAMINER TRAN, THUY V

PAPER NUMBER

ART UNIT

DATE MAILED: 04/22/2005

|   | APPLICATION NO. FILING DATE |            | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|---|-----------------------------|------------|----------------------|---------------------|------------------|
| • | 10/713,004                  | 11/17/2003 | Jorg Lott            | 02P19522            | 9410             |

TITLE OF INVENTION: METHOD FOR OPERATING AT LEAST ONE LOW-PRESSURE DISCHARGE LAMP AND OPERATING DEVICE FOR AT LEAST ONE LOW-PRESSURE DISCHARGE LAMP

| APPLN. TYPE    | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE   |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO           | \$1400    | \$300           | \$1700           | 07/22/2005 |

THE APPLICATION IDENTIFIED ABOVE HAS BEEN EXAMINED AND IS ALLOWED FOR ISSUANCE AS A PATENT. PROSECUTION ON THE MERITS IS CLOSED. THIS NOTICE OF ALLOWANCE IS NOT A GRANT OF PATENT RIGHTS. THIS APPLICATION IS SUBJECT TO WITHDRAWAL FROM ISSUE AT THE INITIATIVE OF THE OFFICE OR UPON PETITION BY THE APPLICANT. SEE 37 CFR 1.313 AND MPEP 1308.

THE ISSUE FEE AND PUBLICATION FEE (IF REQUIRED) MUST BE PAID WITHIN THREE MONTHS FROM THE MAILING DATE OF THIS NOTICE OR THIS APPLICATION SHALL BE REGARDED AS ABANDONED. THIS STATUTORY PERIOD CANNOT BE EXTENDED. SEE 35 U.S.C. 151. THE ISSUE FEE DUE INDICATED ABOVE REFLECTS A CREDIT FOR ANY PREVIOUSLY PAID ISSUE FEE APPLIED IN THIS APPLICATION. THE PTOL-85B (OR AN EQUIVALENT) MUST BE RETURNED WITHIN THIS PERIOD EVEN IF NO FEE IS DUE OR THE APPLICATION WILL BE REGARDED AS ABANDONED.

#### HOW TO REPLY TO THIS NOTICE:

I. Review the SMALL ENTITY status shown above.

If the SMALL ENTITY is shown as YES, verify your current SMALL ENTITY status:

- A. If the status is the same, pay the TOTAL FEE(S) DUE shown above.
- B. If the status above is to be removed, check box 5b on Part B Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and twice the amount of the ISSUE FEE shown above, or

If the SMALL ENTITY is shown as NO:

- A. Pay TOTAL FEE(S) DUE shown above, or
- B. If applicant claimed SMALL ENTITY status before, or is now claiming SMALL ENTITY status, check box 5a on Part B Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and 1/2 the ISSUE FEE shown above.
- II. PART B FEE(S) TRANSMITTAL should be completed and returned to the United States Patent and Trademark Office (USPTO) with your ISSUE FEE and PUBLICATION FEE (if required). Even if the fee(s) have already been paid, Part B Fee(s) Transmittal should be completed and returned. If you are charging the fee(s) to your deposit account, section "4b" of Part B Fee(s) Transmittal should be completed and an extra copy of the form should be submitted.
- III. All communications regarding this application must give the application number. Please direct all communications prior to issuance to Mail Stop ISSUE FEE unless advised to the contrary.

IMPORTANT REMINDER: Utility patents issuing on applications filed on or after Dec. 12, 1980 may require payment of maintenance fees. It is patentee's responsibility to ensure timely payment of maintenance fees when due.

### PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE **Commissioner for Patents** P.O. Box 1450 Alexandria, Virginia 22313-1450

(703) 746-4000 or Fax

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

| CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of addre                                                                                                                   |                                                                                                                   |                                                                                                    |                                                                                                                                                                                       | Fee(s) Transmittal. I papers. Each addition                                                                                                                                                                                                                                                                                                        | of mailing can only be used for<br>This certificate cannot be used<br>and paper, such as an assignment<br>ate of mailing or transmission.             | for any other accompanying                                                                                                                           |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|
| OSRAM SYLVA<br>100 ENDICOTT S<br>DANVERS, MA 0                                                                                                                                              | TREET                                                                                                             |                                                                                                    |                                                                                                                                                                                       | Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the Unite States Postal Service with sufficient postage for first class mail in an envelop addressed to the Mail Stop ISSUE FEE address above, or being facsimitransmitted to the USPTO (703) 746-4000, on the date indicated below. |                                                                                                                                                       |                                                                                                                                                      |
|                                                                                                                                                                                             |                                                                                                                   |                                                                                                    |                                                                                                                                                                                       | Table 10 the Ot                                                                                                                                                                                                                                                                                                                                    | 77 10 (703) 7 10 1000, 011 110 0                                                                                                                      | (Depositor's name)                                                                                                                                   |
|                                                                                                                                                                                             |                                                                                                                   |                                                                                                    |                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                       | (Signature)                                                                                                                                          |
|                                                                                                                                                                                             |                                                                                                                   |                                                                                                    |                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                       | (Date)                                                                                                                                               |
| APPLICATION NO.                                                                                                                                                                             | FILING DATE                                                                                                       | FI                                                                                                 | RST NAMED INVEN                                                                                                                                                                       | TOR                                                                                                                                                                                                                                                                                                                                                | ATTORNEY DOCKET NO.                                                                                                                                   | CONFIRMATION NO.                                                                                                                                     |
| 10/713,004                                                                                                                                                                                  | 11/17/2003                                                                                                        |                                                                                                    | Jorg Lott                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                    | 02P19522                                                                                                                                              | 9410                                                                                                                                                 |
| TITLE OF INVENTION: N                                                                                                                                                                       |                                                                                                                   | G AT LEAST ONE                                                                                     | E LOW-PRESSURE                                                                                                                                                                        | DISCHARGE LAI                                                                                                                                                                                                                                                                                                                                      | MP AND OPERATING DEVI                                                                                                                                 | CE FOR AT LEAST ONE                                                                                                                                  |
| APPLN. TYPE                                                                                                                                                                                 | SMALL ENTITY                                                                                                      | ISSUE FEE                                                                                          | PU                                                                                                                                                                                    | BLICATION FEE                                                                                                                                                                                                                                                                                                                                      | TOTAL FEE(S) DUE                                                                                                                                      | DATE DUE                                                                                                                                             |
| nonprovisional                                                                                                                                                                              | NO                                                                                                                | \$1400                                                                                             |                                                                                                                                                                                       | \$300                                                                                                                                                                                                                                                                                                                                              | \$1700                                                                                                                                                | 07/22/2005                                                                                                                                           |
| EXAM                                                                                                                                                                                        | IINER                                                                                                             | ART UNIT                                                                                           | CI                                                                                                                                                                                    | ASS-SUBCLASS                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                       |                                                                                                                                                      |
| TRAN, 1                                                                                                                                                                                     | THUY V                                                                                                            | 2821                                                                                               |                                                                                                                                                                                       | 315-308000                                                                                                                                                                                                                                                                                                                                         | _                                                                                                                                                     |                                                                                                                                                      |
| Address form PTO/SB/12  "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required.  3. ASSIGNEE NAME AND                                                                             | or more recent) attached. Use<br>PRESIDENCE DATA TO B<br>an assignee is identified be<br>137 CFR 3.11. Completion | e of a Customer  E PRINTED ON THe low, no assignee da of this form is NOT a                        | or agents OR, alter  (2) the name of a registered attorney 2 registered patent listed, no name with the patent patent in the patent patent will appear on the a substitute for filing | single firm (having as<br>or agent) and the na<br>attorneys or agents.<br>Il be printed.                                                                                                                                                                                                                                                           | s a member a 2<br>mes of up to<br>If no name is 3<br>gnee is identified below, the d                                                                  | ocument has been filed for                                                                                                                           |
| Please check the appropriate                                                                                                                                                                | assignee category or catego                                                                                       | ries (will not be print                                                                            | ted on the patent):                                                                                                                                                                   | ☐ Individual ☐                                                                                                                                                                                                                                                                                                                                     | Corporation or other private gro                                                                                                                      | oup entity Government                                                                                                                                |
| 4a. The following fee(s) are                                                                                                                                                                | enclosed:                                                                                                         |                                                                                                    |                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                       |                                                                                                                                                      |
| Issue Fee                                                                                                                                                                                   | mall antity discount narmitts                                                                                     |                                                                                                    | ☐ A check in the amount of the fee(s) is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached.                                                                               |                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                       |                                                                                                                                                      |
| Publication Fee (No small entity discount permitted) Advance Order - # of Copies                                                                                                            |                                                                                                                   |                                                                                                    | The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number(enclose an extra copy of this form).                            |                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                       |                                                                                                                                                      |
| 5. Change in Entity Status                                                                                                                                                                  | (from status indicated above MALL ENTITY status. See                                                              | · _                                                                                                | h Applicant is no                                                                                                                                                                     | longer claiming SM                                                                                                                                                                                                                                                                                                                                 | ALL ENTITY status. See 37 C                                                                                                                           | FR 1 27(g)(2)                                                                                                                                        |
|                                                                                                                                                                                             |                                                                                                                   |                                                                                                    |                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                    | usly paid issue fee to the applicate gistered attorney or agent; or the                                                                               |                                                                                                                                                      |
| Authorized Signature                                                                                                                                                                        |                                                                                                                   |                                                                                                    |                                                                                                                                                                                       | Date                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                       |                                                                                                                                                      |
| Typed or printed name                                                                                                                                                                       |                                                                                                                   |                                                                                                    | Registration No.                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                       |                                                                                                                                                      |
| This collection of informatic<br>an application. Confidentiali<br>submitting the completed ap<br>this form and/or suggestions<br>Box 1450, Alexandria, Virgi<br>Alexandria, Virginia 22313- | polication form to the USPT<br>for reducing this burden, shinia 22313-1450. DO NOT                                | 11. The information 122 and 37 CFR 1.1 O. Time will vary de tould be sent to the C SEND FEES OR CO | is required to obtain<br>14. This collection is<br>epending upon the<br>Chief Information O<br>DMPLETED FORM                                                                          | or retain a benefit by<br>s estimated to take 1?<br>ndividual case. Any<br>fficer, U.S. Patent an<br>S TO THIS ADDRE                                                                                                                                                                                                                               | y the public which is to file (and 2 minutes to complete, includir comments on the amount of the drademark Office, U.S. Dep SS. SEND TO: Commissioner | d by the USPTO to process)<br>ag gathering, preparing, and<br>me you require to complete<br>artment of Commerce, P.O.<br>for Patents, P.O. Box 1450, |

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| 10/713,004 11/17/2003                    |                             | 003          | Jorg Lott            | 02P19522                | 9410             |  |  |
| 24252                                    | 7590 0                      | 14/22/2005   |                      | EXAMINER                |                  |  |  |
| OSRAM SYLV                               |                             | TRAN, THUY V |                      |                         |                  |  |  |
| 100 ENDICOTT STREET<br>DANVERS, MA 01923 |                             |              |                      | ART UNIT                |                  |  |  |
|                                          |                             |              |                      | 2821                    |                  |  |  |
|                                          |                             |              |                      | DATE MAILED: 04/22/2005 |                  |  |  |

## Determination of Patent Term Adjustment under 35 U.S.C. 154 (b)

(application filed on or after May 29, 2000)

The Patent Term Adjustment to date is 0 day(s). If the issue fee is paid on the date that is three months after the mailing date of this notice and the patent issues on the Tuesday before the date that is 28 weeks (six and a half months) after the mailing date of this notice, the Patent Term Adjustment will be 0 day(s).

If a Continued Prosecution Application (CPA) was filed in the above-identified application, the filing date that determines Patent Term Adjustment is the filing date of the most recent CPA.

Applicant will be able to obtain more detailed information by accessing the Patent Application Information Retrieval (PAIR) WEB site (http://pair.uspto.gov).

Any questions regarding the Patent Term Extension or Adjustment determination should be directed to the Office of Patent Legal Administration at (571) 272-7702. Questions relating to issue and publication fee payments should be directed to the Customer Service Center of the Office of Patent Publication at (703) 305-8283.